

News and Features

Bills may extend working women's rights to breast-feed

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Scott Gottlieb, New York

A woman's right to breast-feed in the workplace is the subject of 3 legislative bills recently introduced to the US House of Representatives. Taken together, the bills aim to extend civil rights protections to nursing mothers and encourage employers to offer special benefits to foster breastfeeding. At least 1 of the bills has wide bipartisan support and appears likely to pass the House later this year, according to a legislative aide to the bill's chief congressional sponsor, Congresswoman Carolyn Maloney (D-NY).

Several political and medical developments over the past few years have prompted companies to adopt policies on breastfeeding at work, mirroring the legislative efforts to guarantee those benefits. In the past 2 years, more than one third of the states have enacted legislation concerning breastfeeding. Most of the new laws, including one in California, concern a woman's right to breast-feed in public. Last year Minnesota required employers to make "reasonable efforts" to provide unpaid break time and a room other than a restroom stall where nursing employees can express their milk in privacy.

Federal legislation introduced by Representative Maloney, called the Pregnancy Discrimination Act Amendment of 1999, would clarify the Pregnancy Discrimination Act of 1978 to protect a woman's right to breast-feed or express milk during the work day. Another provision included in a second and separate bill introduced by Maloney, titled Breastfeeding Promotion and Employers' Tax Incentive Act of 1999, would provide a tax credit for half of the expenses incurred by employers who provide an appropriate environment on business premises for employed mothers to breast-feed or express milk. A third bill—the Right to Breast-Feed Act, which has congressional support from both Republicans and Democrats and appears to be the most likely to pass this year—would guarantee a woman's right to breast-feed her child anywhere on federal property, including public spaces.

"Many women who have contacted my office on this issue have been fired or discriminated against for expressing milk dur-



Women listening to testimony before the House Law and Justice Committee in Washington on a bill that says breast-feeding in public cannot be considered indecent exposure.

ing the day," said Representative Maloney. "Some have been harassed on the job or had their pay docked because they used their regular breaks or lunchtime to pump milk. Some have purchased breast pumps that were painful, ineffective, or damaging."

The issue has gained prominence in political circles because of the increasing number of mothers who now work outside the home. In 1960 just 13% of married women with preschool children were employed. Today the number has risen five-fold to 60%, and new mothers are the fastest-growing segment of the labor force.

Increasing pressure has prompted many state governments to consider enacting their own laws in advance of the federal legislation now working its way through Congress. For the third year in a row, the Washington state legislature is being asked to decriminalize breastfeeding in public and require employers to accommodate their breastfeeding workers. The California assembly is considering legislation (Bill #157) that would give women the specific right to breast-feed wherever they are otherwise entitled to be.

Medical experts have pointed to the fact that the United States has one of the lowest breastfeeding rates of any industrialized nation. They cite this statistic as evidence that federal and state governments are not acting fast enough to promote breastfeeding for working mothers. Representative Maloney pointed out that more than three fourths of the countries in the world, but not the United States, conform to the standards set forth by the International Labour Organization (ILO), a United Nations agency that examined the issue. The ILO's standards for maternity include 12 weeks of leave and breastfeeding breaks thereafter totaling at least 1 hour per day. A report released last year found that special breaks for nursing mothers are established law in more than 80 countries, with about half of these nations requiring additional breaks beyond the normal rest periods. The United States currently has no national laws that guarantee special benefits for nursing mothers.

As a result, according to a recent national report by the American Academy of Pediatrics, 59% of new mothers breast-feed their babies at the time of hospital discharge, but

AP Photo/Louis Bialikoff

that proportion slips to 22% in 6 months, mainly because many of the mothers return to work. Meanwhile, the American Academy of Pediatrics recommends breastfeeding for at least the first 12 months after birth. "The widespread assumption in America today is that it is neither possible nor reasonable to combine breastfeeding and employment," said Lawrence M. Gartner, M.D., professor of pediatrics at the University of Chicago Medical School. "But there is no reason a mother can't return to work and continue to provide breast milk for her baby."

In response to medical evidence and political pressure, as well as the realization that maternal benefits help retain employ-

ees, companies are beginning to offer lactation programs for new mothers. "Among the things companies are doing is allowing breaks and flexible work hours so that women can pump or breast-feed, providing comfortable and private space for pumping, and renting or purchasing electric breast pumps to shorten the time employees need to express their milk," said Rachel Mastow, head of child health and maternal issues for the Washington Business Group on Health, a nonprofit organization that promotes health policy and work-site issues.

"From a corporate perspective, one of the things working in favor of lactation programs

is that companies are realizing that it makes economic sense to offer these programs," said Rona Cohen, president of Corporate Lactation Programs for MCH Services, Inc., a company that assists large corporations in setting up maternal lactation programs. "We looked at this and found that it actually ends up saving companies money because it reduces employee absenteeism and promotes healthy babies. The mothers end up missing fewer days from work."

Even when lactation programs have been voluntarily implemented by corporations, says Cohen, "It's still not being offered as an equal benefit to all employees. It's not supported among blue-collar workers."

Survey reveals deficits in women's health care

Janice Hopkins Tanne, New York

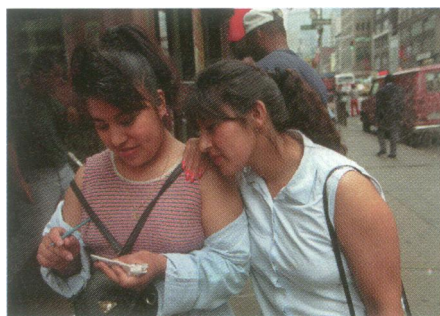
A study of women's health in the United States by the Commonwealth Fund, a philanthropic organization, has indicated worsening health care and widespread violence and abuse for poorer women. The study, conducted by a national polling organization, was based on telephone interviews between May and November 1998 with 2850 women and 1500 men, chosen as a cross section of the population with an additional over-sample of African-American, Hispanic, and Asian-American women.

Interviewees were asked about health knowledge and behavior, access to care, violence, depression, use of hormone replacement therapy, and caregiving roles. Results published last week showed that since a comparable survey had been done in 1993, the number of noninsured women of working age had increased from 14% to 18%. In the lowest income category—under \$16,000 a year—35% of women had no health insurance. The main reason seemed to be a drop in health insurance provided through the woman's job or through her husband's employment.

Only one half to two thirds of the women interviewed had received preventive care in the past year, including a physical examination, clinical breast examination, cervical smear, or cholesterol test, even though 76% of women were in managed care. This number closely matched that of 5 years ago.

Women on low incomes and those who did not have a university education were less likely to receive regular preventive care or advice on hormone replacement therapy.

Regardless of insurance coverage, 20% of women under the age of 65 years reported problems in getting the medical care they thought they needed, in gaining access to a specialist, or in getting a prescription filled because of cost.



Female workers risk loss of health insurance if they lose their jobs.

The Commonwealth Fund is working with the National Committee for Quality Assurance, an accrediting organization, to identify the health plans that include the best practices in women's health. Senator Patty Murray of Washington has recently introduced a bill in the US Senate that would require managed care plans to cover contra-

ception, mammography, and screening for colon cancer and to provide information about treatments such as hormone replacement therapy.

Violence and abuse were identified as major problems by the survey. Thirty-nine percent of women reported that they had experienced domestic abuse or violence, childhood physical or sexual abuse, or rape. This was the first time the survey asked about these issues, so trends cannot be assessed. The Commonwealth Fund is supporting efforts to train all those who work in healthcare settings, from secretaries and security guards to doctors, to be aware of the signs of violence and abuse and informed about sources of help.

Women were also found to be burdened with the care of sick or disabled relatives, in addition to their jobs and their childrearing responsibilities. Nine percent of women were caring for a relative, compared with only 4% of men, and 43% of women caring for relatives spent 20 hours a week or more on these tasks.

Health concerns across a woman's lifespan: the Commonwealth Fund 1998 Survey of Women's Health is publication number 332 of the Commonwealth Fund Commission on Women's Health. It is available free from the Commonwealth Fund, 1 East 75th Street, New York, NY 10021. It is also posted on the Fund's website: www.cmf.org